

CRIMINAL ☒ TRAFFIC ☐ NON-TRAFFIC L.E.A. ORI #: WA0311900 COURT ORI #: WA031031J 320805736 REPORT #: 13-02550

IN THE ☐ DISTRICT ☒ MUNICIPAL COURT OF MARYSVILLE MUNICIPAL COURT ☒ CITY/TOWN OF LAKE STEVENS, PLAINIFF VS. NAMED DEFENDANT

STATE OF WASHINGTON ☐ COUNTY OF THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF WASHINGTON

DRIVER'S LICENSE NO. STATE EXPIRES PHOTO ID MATCHED NAME: LAST FIRST MIDDLE SFX COL
(SCANNED/ID ONLY) WA 01-22-17 ☒ YES ☐ NO DOUGLAS ERIKA CLARINE ☐ YES ☐ NO

DOUGLEC13282 ADDRESS 10937 34TH PL NE ☐ IF NEW ADDRESS CITY LAKE STEVENS STATE WA ZIP CODE 98258153

EMPLOYER DATE OF BIRTH RACE SEX HEIGHT WEIGHT EYES HAIR RESIDENTIAL PHONE NO. CELL/PAGER PHONE NO. WORK PHONE NO.

01-22-87 W INTERPRETER NEEDED AT LOCATION 30TH ST NE CEDAR ST EMPLOYER LOCATION CITY LAKE STEVENS STATE WA ZIP CODE 98258153

VIOLATION DATE 10/12/2013 9:32 LANG: DID OPERATE THE FOLLOWING VEHICLE/MOTOR VEHICLE ON A PUBLIC HIGHWAY AND

VEH LIC NO A09615Z STATE WA EXPIRES 09-17-13 VEH YR 2000 MAKE NISSAN MODEL PICK UP TR #1 UC NO TR #2 LIC NO STATE WA EXPIRES TR YR

TR #1 UC NO STATE WA EXPIRES TR YR

OWNER/COMPANY IF OTHER THAN DRIVER ADDRESS CITY STATE ZIP CODE

ACCIDENT POSSIBLE INJURY BAC COMMERCIAL VEHICLE YES 16+ YES HAZMAT YES EXEMPT VEHICLE FIRE LEA

1. VIOLATION/STATUTE CODE 46.20.342.1C ☐ DV THEN AND THERE COMMIT EACH OF THE FOLLOWING OFFENSES

2. VIOLATION/STATUTE CODE ☐ DV

3. VIOLATION/STATUTE CODE ☐ DV

4. VIOLATION/STATUTE CODE ☐ DV

5. VIOLATION/STATUTE CODE ☐ DV

MANDATORY COURT APPEARANCE APPEARANCE DATE 10-15-13 TIME 8:30 AM

RELATED # DATE ISSUED 10-12-13

☒ TICKET SERVED ON VIOLATOR ☐ TICKET REFERRED TO PROSECUTOR

☐ TICKET SENT TO COURT FOR MAILING ☐ BOOKED

CRIMINAL CITATION

You are charged with the crime(s) described on this form. You must respond to the court below.

CRIMINAL CITATION

YOU DO NOT APPEAR THIS MAY RESULT IN A WARRANT FOR YOUR ARREST AND DETENTION IN JAIL. ALSO, IF "TRAFFIC" IS CHECKED YOU MAY LOSE YOUR DRIVER'S LICENSE/PRIVILEGE.

TRAFFIC CITATIONS MAY GO ON YOUR DRIVING RECORD.

MARYSVILLE MUNICIPAL COURT 1015 STATE AVE

MARYSVILLE WA 98270-4301

Phone: (360)363-8050

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT I HAVE ISSUED THIS ON THE DATE AND AT THE LOCATION ABOVE, THAT I HAVE PROBABLE CAUSE TO BELIEVE THE ABOVE NAMED PERSON COMMITTED THE ABOVE OFFENSE(S), AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.

OFFICER CHAD CHRISTENSEN # 075

OFFICER

OFFICER

OFFICER

OFFICER

OFFICER

OFFICER



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1691971

REPORT NO.

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION

DATE OF COLLISION	10	-	12	-	2013
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TIME (2400)	0932	COUNTY #	31	MILES		N	E	IN	OF	CITY #	0664
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ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input type="checkbox"/>	NON-INTERSECTION <input checked="" type="checkbox"/>
30TH ST NE	BLOCK NO. <input checked="" type="checkbox"/>	10800
	MILE POST <input type="checkbox"/>	

DISTANCE	5	00	MILES	N	E	OF (REFERENCE OR CROSS STREET)	CEDAR RD	S	W
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UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	PHONE	D: 4253508668
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LAST NAME	DOUGLAS	FIRST NAME	ERIKA	MIDDLE INITIAL	C
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STREET NEW ADDRESS	10937 34TH PL NE
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CITY	LAKE STEVENS	ST	WA	ZIP	982588153
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	DOUGLEC132B2	STATE	WA	SEX	F	D.O.B. MM/DD/YYYY	01	-	22	-	1987
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	A09615Z	STATE	WA	VIN	1N6ED27T4YC437318
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2000	MAKE	NISS	MODEL	PICK UP	STYLE	2T	VEHICLE TOWED	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT <input type="checkbox"/>	INSURANCE CO & POLICY #	VEHICLE LEGALLY STANDING	YES <input type="checkbox"/>	NO <input type="checkbox"/>	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	PHONE	D: 4253451805
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LAST NAME	OXNER	FIRST NAME	ALEXA	MIDDLE INITIAL	M
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STREET NEW ADDRESS	305 AVENUE I
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CITY	SNOHOMISH	ST	WA	ZIP	982902637
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CDL	RESTRICTIONS	J	ENDORSEMENTS
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DRIVER'S LICENSE #	OXNERAM171NR	STATE	WA	SEX	F	D.O.B. MM/DD/YYYY	08	-	19	-	1983
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR	4	EJECT	1	HELMET USE	INJURY CLASS	0	NATURE OF INJURIES
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LICENSE PLATE #	145XLT	STATE	WA	VIN	JTEHF21A010006091
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2001	MAKE	TOYT	MODEL	HIGHLND	STYLE	UT	VEHICLE TOWED	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	ALEXA OXNER 305 AVENUE I SNOHOMISH WA 98290
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LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	COUNTRY FINANCIAL C46A4759248	VEHICLE LEGALLY STANDING	YES <input type="checkbox"/>	NO <input type="checkbox"/>	CITATION #	CHARGE
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OFFICER'S NAME (PRINT)	CHAD CHRISTENSEN	BADGE OR ID #	075	AGENCY	WA0311900
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VEHICLE NO. 1 SHADE IN DAMAGED AREA

VEHICLE NO. 2 SHADE IN DAMAGED AREA

VEHICLE NO. 3 SHADE IN DAMAGED AREA

VEHICLE NO. 4 SHADE IN DAMAGED AREA

VEHICLE NO. 5 SHADE IN DAMAGED AREA

VEHICLE NO. 6 SHADE IN DAMAGED AREA

VEHICLE NO. 7 SHADE IN DAMAGED AREA



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO.

CASE 13-02550

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)									
NAME (LAST, FIRST, MIDDLE INITIAL)									
ADDRESS & PHONE #									
PASSENGER	WITNESS	UNIT	SEA TUG	AIRBAG	REST	ELEC	HELM TUE	NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)									
ADDRESS & PHONE #									
PASSENGER	WITNESS	UNIT	SEA TUG	AIRBAG	REST	ELEC	HELM TUE	NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)									
ADDRESS & PHONE #									
PASSENGER	WITNESS	UNIT	SEA TUG	AIRBAG	REST	ELEC	HELM TUE	NATURE OF INJURIES	

NARRATIVE

Unit 1 was entered the 90% right hand turn from the south at 25 mph. Unit 2 entered the 90% turn and was struck by Unit 1 when it failed to stay in its lane as it rounded the turn. There were no reported injuries. Driver of Unit 2 did state she would be going to the walk-in clinic to be checked out due to being pregnant. Both vehicles were driven from the location.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

CHAD CHRISTENSEN

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

10-13-13 11:24 AM

DATED

PLACE SIGNED

APPROVED BY

CHAD CHRISTENSEN 075

DATE

10/13/2013 11:37:54 AM

BADGE OR ID

075

ORI

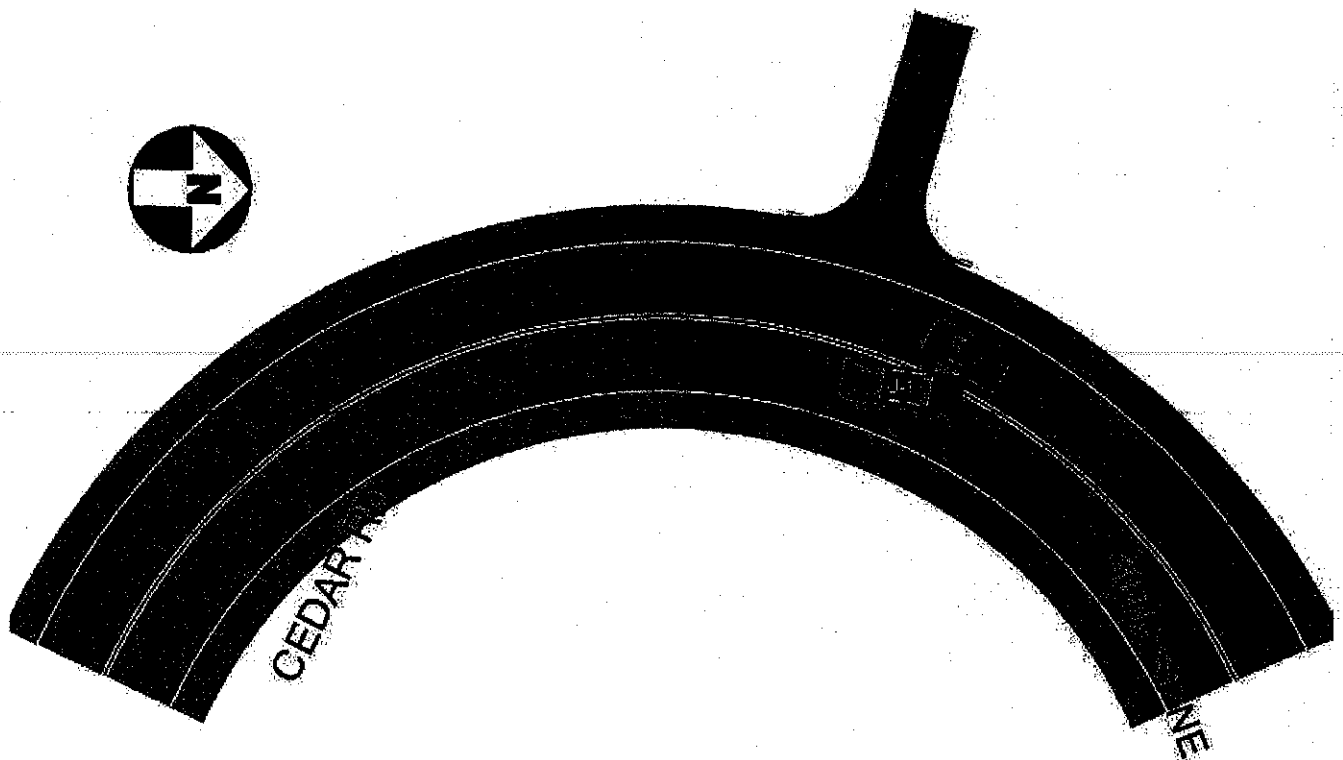
WA0311900

TIME OF DISPATCH

9:34 AM

TIME POLICE ARRIVED

9:39 AM



DRAWING IS NOT TO SCALE

STATE OF WASHINGTON UNIFORM INCIDENT REPORT

AGENCY NAME LAKE STEVENS POLICE DEPT.				<input type="checkbox"/> OFCR SAFETY <input type="checkbox"/> OFCR ASSAULT				INCIDENT NUMBER 13-02550																			
TYPE OF REPORT				<input checked="" type="checkbox"/> PERSONS <input type="checkbox"/> PROPERTY <input type="checkbox"/> INFORMATION				<input checked="" type="checkbox"/> VEHICLE <input checked="" type="checkbox"/> ARREST <input type="checkbox"/> PHONE REPORT				<input type="checkbox"/> JUVENILE <input type="checkbox"/> CHILD ABUSE <input type="checkbox"/> DOMESTIC VIOLENCE				<input type="checkbox"/> HATE / BIAS <input type="checkbox"/> ARSON - LOSS \$ <input type="checkbox"/> OTHER:				<input type="checkbox"/> COMPUTER USED <input type="checkbox"/> DRUG RELATED <input type="checkbox"/> ALCOHOL RELATED							
INCIDENT CLASSIFICATION Collision / Dwls 3												YES <input type="checkbox"/> NO <input type="checkbox"/> INITIAL															
ADDRESS / LOCATION OF INCIDENT 30th / Cedar Rd						PREMISES TYPE / NAME Roadway						DV PHAMPHLET GIVEN: YES <input type="checkbox"/> NO <input type="checkbox"/>															
MONTH	DAY	YEAR	TIME	DOW	MONTH	DAY	YEAR	TIME	DOW	MONTH	DAY	YEAR	TIME	DOW													
10	12	13	0932	Sun	10	12	13	0932	Sun	10	12	13	1014	Sun													
ADDL ON SUPP. <input type="checkbox"/> PERSONS <input type="checkbox"/> VEHICLES <input type="checkbox"/> COLLISION RPT.																											
NO. W1		NON-DISC.		NAME (LAST, FIRST, MIDDLE) Oxner, Alexa M				RACE W		ETH		SEX F		DOB 081983		HGT		WGT		HAIR BLN		EYES BLU					
STREET ADDRESS 3183 113TH Ave Ne										CITY Lake Stevens					STATE WA		ZIP CODE 98258		RES. STATUS: F <input type="checkbox"/> P <input type="checkbox"/> NO <input type="checkbox"/> U <input type="checkbox"/>								
RESIDENCE PHONE 425-345-1805				BUSINESS PHONE				OCCUPATION				SOCIAL SECURITY NO				HATE / BIAS		TYPE VIC		TYPE INJ.		VICTIM OF OFNS#		OFNDR#		RELAT.	
NO.		NON-DISC.		NAME (LAST, FIRST, MIDDLE)				RACE		ETH		SEX		DOB		HGT		WGT		HAIR		EYES					
STREET ADDRESS										CITY					STATE		ZIP CODE		RES. STATUS: F <input type="checkbox"/> P <input type="checkbox"/> NO <input type="checkbox"/> U <input type="checkbox"/>								
RESIDENCE PHONE				BUSINESS PHONE				OCCUPATION				SOCIAL SECURITY NO				HATE / BIAS											
NUMBER OF SUSPECTS / ARRESTED PERSONS IN THIS INCIDENT: 1																											
NO. A1		NAME (LAST, FIRST, MIDDLE) Douglas, Erika C				RACE W		ETH		SEX F		DOB 012287		AGE 26		HGT 501		WGT 110		HAIR BRN		EYES BLU					
ALIAS NAME(S)						IDENTIFIERS																					
STREET ADDRESS 10307 34th Pl Ne						CITY Lake Stevens					STATE WA		ZIP 98258		RES. STATUS: F <input type="checkbox"/> P <input type="checkbox"/> NO <input type="checkbox"/> U <input type="checkbox"/>		RES. PHONE										
EMPLOYMENT / OCCUPATION / SCHOOL Unemployed						BUS. PHONE				SOCIAL SECURITY NUMBER				DRIVERS LICENSE / I.D. CARD NO: DOUGLEC132B2				STATE WA									
IBR ARREST OFFENSE NO.		BOOKED / WHERE				BOOKING #				CHARGES				CITATION / WARRANT # / AGENCY				BAIL									
ARREST DATE 101213		LOCATION OF ARREST 300th / Cedar Rd.								1. M <input checked="" type="checkbox"/> F <input type="checkbox"/> Dwls/R 3 3z0805736																	
2. M <input type="checkbox"/> F <input type="checkbox"/>																											
3. M <input type="checkbox"/> F <input type="checkbox"/>																											
AFFILIATION		ON VIEW ARREST <input checked="" type="checkbox"/>		CITED <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>		STATEMENT <input checked="" type="checkbox"/> ORAL <input type="checkbox"/> WRIT.		CHARGES <input checked="" type="checkbox"/> ADMITTED <input type="checkbox"/> DENIED		ARRESTEE ARMED WITH				PCN / IDENTIFICATION NUMBER				MULTI CLEAR <input type="checkbox"/>									
JUV. PARENT GDN. NOTIFIED <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>		NAME / RELATIONSHIP OF PERSON NOTIFIED						DATE / TIME NOTIFIED				NOTIFIED BY:				DISPOSITION OF JUVENILE H <input type="checkbox"/> R <input type="checkbox"/>											
VEHICLE CODES:		<input type="checkbox"/> STOLEN # <input type="checkbox"/> RECOVERED #		<input type="checkbox"/> LOCATED <input type="checkbox"/> TOWED <input type="checkbox"/> EVIDENCE		<input type="checkbox"/> SEIZED <input type="checkbox"/> ABANDONED		<input type="checkbox"/> DAMAGED / VANDALIZED <input type="checkbox"/> OTHER		<input type="checkbox"/> VICTIM'S VEH. <input type="checkbox"/> SUSPECT'S VEH.				<input type="checkbox"/> HOLD FOR:													
NO. 1		LICENSE NUMBER A09615Z		STATE WA		VIN / HULL NUMBER		YEAR 00		MAKE NISSAN		MODEL TRK		STYLE 2DR													
COLOR BLK		SPECIAL FEATURES / DESCRIPTION						DRIVER IS: <input checked="" type="checkbox"/> R / O <input type="checkbox"/> PERSON #:				REGISTERED OWNER'S NAME															
VEHICLE DISPOSITION <input type="checkbox"/> LEFT AT SCENE <input type="checkbox"/> DRIVEN AWAY <input type="checkbox"/> TOWED		TOW COMPANY NAME / ADDRESS / PHONE						STATE TOW NO.				REGISTERED OWNER'S ADDRESS															
LOCKED <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>		KEYS IN VEHICLE <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>		DELINQ. PAYMENT <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>		VICTIM CONSENT <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>		THEFT INS. <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>		DRIVE-ABLE <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>		DAMAGE TO VEHICLE <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>		SPECIFY DAMAGE BY SHADING DAMAGED AREA <input type="checkbox"/> TOP <input type="checkbox"/> UNDERSIDE		7 5 3 1 8 6 4 2		DAMAGE EST \$									
MAKING FALSE REPORTS TO PUBLIC OFFICERS: (1) A PERSON COMMITS THE CRIME OF MAKING A FALSE REPORT IF HE / SHE WILLFULLY MAKES ANY UNTRUE, MISLEADING OR EXAGGERATED STATEMENT IN ANY REPORT TO A POLICE OR FIRE DEPT. (2) MAKING A FALSE REPORT IS A MISDEMEANOR. IF PROPERTY CRIME: I DO NOT GIVE ANYONE PERMISSION TO ENTER MY PREMISES AND / OR TAKE / REMOVE MY PROPERTY / VEHICLE. IF FOUND PROPERTY: I HAVE BEEN ADVISED OF CHAPTER 83 OF THE R.C.W. AND <input type="checkbox"/> I DO <input type="checkbox"/> I DO NOT WISH TO CLAIM THE PROPERTY IF THE TRUE OWNER CANNOT BE FOUND.																											
<input type="checkbox"/> RELEASED PROPERTY TO <input type="checkbox"/> I DO <input type="checkbox"/> DO NOT ACCEPT LIABILITY FOR TOWING AND STORAGE <input type="checkbox"/> THE NAMED JUVENILE IS PRESENTLY A RUNAWAY <input type="checkbox"/> THE NAMED PERSON IS PRESENTLY MISSING																											
<input type="checkbox"/> I HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE <input checked="" type="checkbox"/> REQUEST NON-DISCLOSURE PER RCW 42.17.310 (E)																											
SIGNATURE OF PERSON																											
OFFICER NAME / NUMBER C. Christensen #75						AREA						DATE															
APPROVED BY						ASSIGNED																					
FORWARD TO <input type="checkbox"/> DYC <input type="checkbox"/> MARYS <input type="checkbox"/> SUPERIOR <input type="checkbox"/> EVRGN						RECEIVED BY <input type="checkbox"/> YES <input type="checkbox"/> NO						DISTRIBUTION <input type="checkbox"/> CPS/APS <input type="checkbox"/> DSHS <input type="checkbox"/> DOL HEARING <input type="checkbox"/> DOC/PROBATION						DATA ENTERED									
DATE																											

13-02550

ADDITIONAL NARRATIVE

AGENCY NAME LAKE STEVENS POLICE DEPARTMENT	INCIDENT CLASSIFICATION Collision / DWLS 3	INCIDENT NUMBER 13-02550
NAME OF VICTIM(S)		

Summary:

On 10/12/2013 Erika Douglas was one of two drivers involved in a two car collision at 30th St and Cedar Rd. During the investigation Erika admitted to driving her vehicle and knowing her driver's license was suspended. Erika was cited and released as the scene.

Narrative:

On 10/12/2013 at 0932 hours, I was dispatched to a collision near the Lake Stevens High School. The reporting person Chris Oxner was calling for his wife that was involved in the collision, but was not at the scene. The text of the call stated the other party involved in the collision did not want police called because she did not have a driver's license.

I arrived in the area and located the collision on the corner of 30th St and Cedar St. During the collision investigation Erika Douglas told me she was driving her Nissan truck (A09615Z) at the time of the collision. Douglas said she was rounding the corner at about 25-mph and that she lost control and slid into Alexa Oxner vehicle.

Douglas provided me with a WA State identifications card showing her to be Eric C Douglas DOB 01/22/1987. At that time Erika told me her driver's license was suspended. I asked for registration and proof of insurance. Erika said she had liability insurance, but had just talked to her insurance company State Farms and was advised her insurance had been frozen for none payment. Erika looked for her registration for the truck and was unable to locate it. I also noted Erika's vehicle license had expired on 9/17/2013.

A driver's check on Erika Douglas showed her drivers' license is suspended in the third degree with three prior convictions for DWLS / R 3. Erika was cited and informed where and when to appear for court. Erika was also informed that if she failed to appear a warrant would be issued for her arrest. Erika was given a verbal warning for no liability insurance, fail to carry a vehicle registration and expired vehicle license.

Attachments:

Citation
 Witness statements
 CAD printout

Recommendations:

It is recommended this case be forwarded to Marysville Municipal Court.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

OFFICER NAME/NUMBER C. Christensen #75	APPROVED BY
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LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

13-02550

OFFICER
LAKE STEVENS


VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) DOUGLAS ERIKA C.	RACE W	ETH	SEX F	DOB 01/22/87	AGE 26	HGT 5'11"	WEIGHT 145	HAIR BLK	EYES BLU
STREET ADDRESS 10357 24th PL NE		CITY LAKE STEVENS		STATE WA		ZIP 98148		RES. STATUS		
HOME PHONE wn		CELL PHONE 425-350-8648		PLACE OF EMPLOYMENT Bothlandsglass						
WORK PHONE 425-350-8911		EMAIL ADDRESS ERIKACD30@gmail.com								

I, ERIKA DOUGLAS, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

As I was coming around a sharp corner on 30th & Cedar, I didn't turn sharp enough & when I noticed a woman driving towards me in the opposite direction I hit & broke up my brakes. My truck hit the drivers side, hit her Toyota Highlander on the drivers side towards the back of her SUV. We both pulled over & exchanged info.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED	LOCATION SIGNED
OFFICER/NUMBER: C. Brown #75	DATE SIGNED 10/13/13	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

13-02550

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Oxner, Alexa Marie	RACE W	ETH	SEX F	DOB 08/19/1983	AGE 30	HGT 5'01"	WEIGHT 125	HAIR Blonde	EYES Blue
STREET ADDRESS 3143 - 113th Ave NE		CITY Lake Stevens		STATE WA		ZIP 98258		RES. STATUS		
HOME PHONE (425) 345-1805		CELL PHONE - same		PLACE OF EMPLOYMENT Costco						
WORK PHONE		EMAIL ADDRESS Alexamoxner@gmail.com								

I, Alexa, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was driving west around corner of 30th & cedar as a black truck came fast around corner the other way and was unable to stay in their lane. She hit the rear left door & wheel of my car. she & I both stopped at location. I didn't have time to get out of the way.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 10/12/13	LOCATION SIGNED
OFFICER/NUMBER: C. Christ #75	DATE SIGNED 10/13/13	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

Case Numbers: \$SS13002550

Initial Type: ACC Initial Alarm Level: Final Alarm Level:
Final Type: ACC (ACCIDENT, NON-INJURY OR UNKNOWN) Pri: 2 Dispo: HI
Police BLK: SS001 Fire BLK: AG1719 Map Page: 377G-4 Group: SS1 Beat: NORT
Src: 9

Loc Info: IFO

Addr:

Phone: 4253615074

```

/0934      (SP0298)   ENTRY              ,AC, THIRD HAND FROM WIFE IN ACC, TAN TOYT HIGHL
                                ANDER VS UNK OTHER VEH , NON INJ, NON BLKG, RP W
                                IFE ALEXA OXNER CELL 425-345-1805, WIFE TOLD RP
                                OTHER DRIVER ASKED HER NOT TO CALL 911 BECUASE S
                                HE HAS NO DRIVERS LIC
/0934      (SP0200)   DISPER    SS1931    #SS75     CHRISTENSEN,OFCR (CHAD)
/0939      (SS75 )   *ONSCNE    SS1931
/0945                      REMINQ    SS1931    MDTWANT,DOUGLAS,ERIKA,C,012287,,,WA,,,,,,,,,,,,,
/0947      (SP0200)   CHANGE                        LOC: 2908 113 AV NE ,LKS -->  30 ST NE/CEDAR RD
                                                ,LKS,
                                                BLK: SS001H -->  SS001
/0947          ASNCAS    SS1931    $SS13002550
/0948          REMINQ    SS1931    VEH,1931,A09615Z,,,,,,,,,,,,,,,,,,,,,,
/1014          CLEAR     SS1931    D/HI
/1014          CLOSE     SS1931

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*** FAX TX REPORT ***

TRANSMISSION OK

JOB NO. 3605
DESTINATION ADDRESS 913606572960
PSWD/SUBADDRESS
DESTINATION ID MSV COURT
ST. TIME 10/15 08:08
USAGE T 03' 21
PGS. 15
RESULT OK

CITATION # 3Z0805736 LSP CT

DOUGLAS, ERIKA C 012287

REPORT #: 13-02550

CITATION #: 3Z0805736

COURT ORI #: WA031031J

ION-TRAFFIC LEA ORI #: WA0311900

COURT OF MARYSVILLE MUNICIPAL COURT

COUNTY OF ☒ CITY/TOWN OF LAKE STEVENS

PLAINTIFF VS. NAMED DEFENDANT

THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF WASHINGTON

EXPIRES 01-22-17 PHOTO I.D. MATCHED NAME: LAST DOUGLAS
☒ YES ☐ NO
FIRST ERIKA
MIDDLE CLARINE
SFX
CDL ☐ YES ☐ NO

☐ IF NEW ADDRESS CITY LAKE STEVENS STATE WA ZIP CODE 982688163

SEX F HEIGHT 5'01" WEIGHT 115 EYES BLU HAIR BRO RESIDENTIAL PHONE NO. (425)350-8868 CELL/PAGER PHONE NO. WORK PHONE NO.
INTERPRETER NEEDED AT LOCATION 30TH ST NE REF. TRAFFICWAY CEDAR ST M.P. BLOCK # 10800 LAKE STEVENS/SNOHOMISH

EXPIRES 09-17-13 VEH YR MAKE 2000 NISSAN TR YR TR #2 LIC NO STATE EXPIRES TR YR
EXPIRES 09-17-13 VEH YR MAKE 2000 NISSAN TR YR TR #2 LIC NO STATE EXPIRES TR YR
STYLE 2-DOOR HARDTOP COLOR BLACK

DID OPERATE THE FOLLOWING VEHICLE/MOTOR VEHICLE ON A PUBLIC HIGHWAY AND
DID THEN AND THERE COMMIT EACH OF THE FOLLOWING OFFENSES

342.1C ☐ DV OWLS 3RD DEGREE
☐ DV
☐ DV
☐ DV
☐ DV
CITY STATE ZIP CODE

APPEARANCE DATE 10-15-13 TIME 8:30 AM RELATED # DATE ISSUED 10-12-13
☐ TICKET REFERRED TO PROSECUTOR
☐ BOOKED
I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT I HAVE ISSUED THIS ON THE DATE AND AT THE LOCATION ABOVE, THAT I HAVE PROBABLE CAUSE TO BELIEVE THE ABOVE NAMED PERSON COMMITTED THE ABOVE OFFENSE(S), AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.
OFFICER CHAD CHRISTENSEN # 075

CHG	DISPOSITION	FINES	SUSPENDED	SUB-TOTAL	FINDING/JUDGMENT DATE	TO SERVE	DAYS
3	G NG D	\$	\$	\$	ABSTRACT MLD TO OLYMPIA	W	DAYS SUSP
3	G NG D	\$	\$	\$	TOTAL COSTS	CREDIT/TIME SVD. Y/N	
3	G NG D	\$	\$	\$		LIC. SURR. DT.	
3	G NG D	\$	\$	\$		REC. NONEXTENSION OF	
3	G NG D	\$	\$	\$		SUSP. Y/N	